PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and nonfication of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1. by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

indicated unless correcte maintenance fee notificat	d below or directed oth ions.	erwise in Block 1, by (a	a) specifying a new corres			E TEE ADDICESS TO	
		ock 1 for any change of address)	TER THEE	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
			pape have	its own certificate of mail	ing or transmission.	-	
26748	7590 01/05		0000 0	Certificate	of Mailing or Transmi	ssion	
PATENT AND	CROP PROTECTI	PARTMENT	State addr	reby certify that this Fee(s es Postal Service with suff essed to the Mail Stop I smitted to the USPTO (57)	ficient postage for first of SSUE FEE address about 273-2885, on the date	class mail in an envelope ove, or being facsimile indicated below.	
410 SWING RO		-	· */ -			(Depositor's name)	
			& TRADENAT		· · · · · · · · · · · · · · · · · · ·	(Signature)	
	•					(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
		Patrick Jelf Crowley	 	70160	5065		
10/536,461 TITLE OF INVENTION		DYLOXYALKYLAMIC	DES AND THEIR USE AS	FUNGICIDES			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1510	\$300	\$0	\$1810	04/06/2009	
EXAMINER ART UNIT		CLASS-SUBCLASS					
MABRY, JOHN 1625			546-291000				
1. Change of corresponde CFR 1.363).	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys						
(1) the hance of correspondence address (or Change of Correspondence or agents OR, alternatively,							
- and the names of sames of the names of the							
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)	lastified below the doc	ument has been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
SYNGENTA LIMITED UNITED KINGDOM							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
15500 FGC			☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.				
Advance Order -			The Dimeter is berek	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above)							
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27 (gr.c.). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
interest as shown by the	records of the United St	ates Patent and Trademai	rk Office.	-			
Authorized Signature	/JAMES_CUEV	NE	 		ry 12, 2009		
Typed or printed name James Cueva Registration No. 58,558							
This collection of inform an application. Confider submitting the complete this form and/or suggess Box 1450, Alexandria, Alexandria, Virginia 22.	nation is required by 37 ontiality is governed by 3 of application form to the tions for reducing this by Virginia 22313-1450. D 313-1450.	CFR 1.311. The informat 5 U.S.C. 122 and 37 CFI e USPTO. Time will va- urden, should be sent to 0 NOT SEND FEES OR	tion is required to obtain or R 1.14. This collection is e- ry depending upon the indi- the Chief Information Office R COMPLETED FORMS 1	retain a benefit by the put stimated to take 12 minute vidual case. Any commen cer, U.S. Patent and Trade O THIS ADDRESS. SEN formation unless it display	olic which is to file (and so to complete, including its on the amount of tim mark Office, U.S. Depart TO: Commissioner for a valid OMB control of the contr	by the USPTO to process) gathering, preparing, and ie you require to complete tranent of Commerce, P.O. or Patents, P.O. Box 1450, number.	
Alexandria, Virginia 22313-1430. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							
						አለሮአየተ ብዩ ሶብኒላኒ/ሚጀሶቹ	
PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010. 02/13/2009 INTEFSW 00000820 10536461			OMB 0651-0033	U.S. Patent and Trademar	K Office; U.S. DEPART		
01 FC:1501 02 FC:1504		1510.00 OP 300.00 OP					